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## UTILITY **PATENT APPLICATION TRANSMITTAL**

Attorney Docket No. First Inventor Apparatus

Colly for flew floripievisio	nai applications under 37 CFR 1.53(t	)) LAPICO	S Mail Label NO.   F	-16505	34100 A3
1	ATION ELEMENTS		DRESS TO: Box	k Patent Applica	
See MPEP chapter 600 con	cerning utility patent application conte	ents.	Wa	ashington, DC 2	0231
	form (e.g., PTO/SB/17) duplicate for fee processing)	7.	CD-ROM or CD-R		ge table or
// // // // // // // // // // // // //	small entity status.	0 Ni	Computer Programuselectide and/or Amino		Cubmicolon
2. See 37 CFR 1.27			rapplicable, all necessa		Submission
3. Specification (preferred arrangement)	[Total Pages <u>30</u> ]] nt set forth below)	a.	Computer Reada	• •	
- Descriptive title		b.	Specification Sequence	e Listing on:	
- Statement Reg	e to Related Applications arding Fed sponsored R & D		i. CD-ROM	or CD-R (2 copi	es); or
	equence listing, a table, program listing appendix		i i. 🔲 paper		
- Background of		c.	Statements verify	ing identity of a	bove copies
- Brief Summary	of the Invention		ACCOMPANYING	APPLICATI	ON PARTS
- Brief Description - Detailed Description	on of the Drawings (if filed)	9.	Assignment Paper		
- Claim(s)	ipuori	<sup>9.</sup>	37 CFR 3.73(b) S	•	Dower of
- Abstract of the	Disclosure	10.	(when there is an		Attorney
4. Drawing(s) (35 L	J.S.C. 113) [ Total Sheets 8	]   11.	English Translation	· <u>·</u>	• • • •
5. Oath or Declaration	[ Total Pages 2	] ] [12.	Information Disclo Statement (IDS)/F		Copies of IDS Citations
a. Newly exec	uted (original or copy)	13.	Preliminary Amer		
b. Copy from a	a prior application (37 CFR 1.63 (d)) ation/divisional with Box 18 completed	<sub>1)</sub> 14.	Return Receipt P		503)
	ION OF INVENTOR(S)	15.	Certified Copy of (if foreign priority	•	ent(s)
	atement attached deleting inventor(s) the prior application, see 37 CFR	16.	Nonpublication R	equest under 35	5 U.S.C. 122
1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/					form PTO/SB/35
6. Application Data Sheet. See 37 CFR 1.76 or its equivalent.					
V Application bate		17.	Other:		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment,					
or in an Application Data Sh		(0.5)			( >
Continuation	Divisional Continuation-in-part	(CIP)	of prior application No.:	0 1011,0	02
Prior application information:	Examiner	-	Group Art Unit:n/a_	-4	
	IONAL APPS only: The entire disclosure fithe disclosure of the accompanying companying c				
	relied upon when a portion has been in				<u>-</u>
	19. CORRESP	ONDENCE AD	DRESS		
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City	Newport Coast	State	cA	Zip Code	92657
Country	USA	949-706-1066	Fax	949-706-1107	
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PTO/SB/17 (11-01)
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Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** 

Complete if Known				
Application Number				
Filing Date	1-26-2002			
First Named Inventor	Hoshena Tu			
Examiner Name	J			
Group Art Unit				
Attorney Docket No.	T4Q-67			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
Check Credit card Money Other None	3. ADDITIONAL FEES					
Deposit Account:		Large Entity Small Entity				
Deposit	Fee	Fee	Fee	Fee	Fee Description	Fee Paid
Account Number	105	e (\$) 130	205	le (\$) 65	Surcharge - late filing fee or oath	
Deposit					· ·	
Account Name	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
The Commissioner is authorized to: (check all that apply)	139	130	139	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1/17	2,520	1	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this applicati	on 112	920*	112	920*	Requesting publication of SIR prior to	
Charge fee(s) indicated below, except for the filing fee to the above identified deposit account.			l		Examiner action	
FEE CALCULATION	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
1. BASIC FILING FEE	115	110	215	55	Extension for reply within first month	
Large Entity   Small Entity	116	400	216	200	Extension for reply within second month	
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$) Fee Paid	117	920	217	460	Extension for reply within third month	
401 740 201 270   Hillips Sline for	118	1,440	218	720	Extension for reply within fourth month	
106 330 206 165 Design filling fee	128	1,960	228	980	Extension for reply within fifth month	
107 510 207 255 Plant filing fee	119	320	219	160	Notice of Appeal	
108 740 208 370 Reissue filing fee	120	320	220	160	Filing a brief in support of an appeal	
114 160 214 80 Provisional filing fee	121	280	221	140	Request for oral hearing	
SUBTOTAL (1) (\$) ≥70-	138	1,510	138	1,510	Petition to institute a public use proceeding	
	140	110	240	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSU		1,280	241	640	Petition to revive - unintentional	
Extra Claims below Fee Pai	7 f	1,280		640	Utility issue fee (or reissue)	
Total Claims20** = X = X = X = X = X = X =	143	460		230	Design issue fee	
Claims ————————————————————————————————————	144	620		310	Plant issue fee	
montple Dependent	122	130	122	130	Petitions to the Commissioner	
Large Entity   Small Entity	123	50	123	50	Processing fee under 37 CFR 1.17(q)	
Fee Fee Fee Fee Description Code (\$) Code (\$)	126	180	126	180	Submission of Information Disclosure Stmt	
103 18 203 9 Claims in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)	
102 84 202 42 Independent claims in excess of 3	146	740	246	370	Filing a submission after final rejection	
104 280 204 140 Multiple dependent claim, if not paid					(37 ČFR § 1.129(a))	
109 84 209 42 ** Reissue independent claims	149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
over original patent  110 18 210 9 ** Reissue claims in excess of 20	179	740	279	370	Request for Continued Examination (RCE)	
and over original patent	169	900	169	900	Request for expedited examination of a design application	
SUBTOTAL (2) (\$)	Other	fee (sp	oecify)		or a design application	
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				Fee Paid SUBTOTAL (3) (\$)		
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SUBMITTED BY	Complete (if applicable)			
Name (Print/Type)	Hoshena Tu	Registration No. (Attorney/Agent)	Telephone	949-887-2966
Signature	-Hoshing Tu		Date	1-16-2002

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